2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000024084

FILED Apr 13, 2011 Secretary of State

Entity Name: CENTRAL FLORIDA EAR NOSE AND THROAT SPECIALISTS, P.A.

Current Principal Place of Business: New Principal Place of Business:

925 WILLISTON PK PT SUITE 1001

LAKE MARY, FL 32746 US

Current Mailing Address: New Mailing Address:

925 WILLISTON PK PT SUITE 1001

LAKE MARY, FL 32746 US

FEI Number: 59-3563247 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DICKS, J W ESQ. 520 CROWN OAK CENTRE DRIVE LONGWOOD, FL 32750 US DICKS, J W ESQ. 520 CROWN OAK CENTRE DRIVE STE 1001 LONGWOOD, FL 32750 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 04/13/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: BRANCH, MICHAEL E

Address: 925 WILLISTON PK PT SUITE 1001 City-St-Zip: LAKE MARY, FL 32746 US

Title: T

Name: BRANCH, MICHAEL E
Address: 925 WILLISTON PARK POINT
City-St-Zip: LAKE MARY, FL 32746 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL BRANCH P 04/13/2011